



PTO/SB/30 (09-04)

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**Request
for
Continued Examination (RCE)
Transmittal**Address to:
Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application Number	09/469,505
Filing Date	12/22/1999
First Named Inventor	Stone et al.
Art Unit	2131
Examiner Name	LAFORGIA, Ch.
Customer No.	25537
Attorney Docket Number	UUN 99 006

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. **Submission required under 37 CFR 1.114** Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).

a. ☒ Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.i. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____ii. ☒ Other Consider the arguments in the response to Final Office action filed March 28, 2005b. ☐ Enclosedi. ☐ Amendment/Replyiii. ☐ Information Disclosure Statement (IDS)ii. ☐ Affidavit(s)/Declaration(s)iv. ☐ Other _____**2. Miscellaneous**a. ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)b. ☐ Other _____**3. Fees** The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 13-2491. I have enclosed a duplicate copy of this sheet.i. ☒ RCE fee required under 37 CFR 1.17(e)ii. ☐ Extension of time fee (37 CFR 1.136 and 1.17) 04/29/2005 SHASSEN1 00000058 132491 09469505iii. ☐ Other 01 FC:1801 790.00 DAb. ☐ Check in the amount of \$ _____ enclosedc. ☐ Payment by credit card (Form PTO-2038 enclosed)**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.****SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

Signature		Date	April 27, 2005
Name (Print/Type)	Phouphanomketh Dithavong	Registration No.	44658

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450 or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.

Signature		Date	April 27, 2005
Name (Print/Type)	Linda V. Wiley		

This collection of information is required by 37 CFR 1.114. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



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Effective on 12/8/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**
For FY 2005☐ Applicant Claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (\$)** **790.00****Complete if Known**

Application Number	09/469,505
Filing Date	December 22, 1999
First Named Inventor	Stone, et al.
Examiner Name	LaForgia, Ch.
Art Unit	2131
Customer No.	25537
Attorney Docket No.	UUN 99 006

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☒ Deposit Account Deposit Account Number: 13-2491 Deposit Account Name: MCI, Inc.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below☐ Charges fee(s) indicated below, except for the filing fee☐ Charge any additional fee(s) or underpayments of fee(s)
under 37 CFR 1.16 and 1.17☐ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
29	- 29 = 0	x \$50.00	= \$ 450.00

HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
3	- 3 = 0	x \$200.00	= \$ 0.00

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
0	- 100 = 0	/ 50 = 0	(round up to a whole number) x \$250.00	= \$ 0.00

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Request for continued examination (RCE)**790.00****SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	44658	Telephone	(703) 425-8508
Name (Print/Type)	Phouphanomketh Ditthavong	Date	April 27, 2005		